

Osong Public Health and Research Perspectives

Journal homepage: http://www.kcdcphrp.org

Editorial

When You Hit Rock-Bottom

Hae-Wol Cho a,b,*



^b College of Medicine, Eulji University, Daejeon, Korea



https://doi.org/10.24171/j.phrp.2019.10.1.01 pISSN 2210-9099 eISSN 2233-6052

Suicide is the act of purposely causing death and a suicide attempt means a self-harm episode where a person tries to commit suicide but fails the attempt. The Republic of Korea has the highest suicide rate among Organisation for Econonomic Cooperation and Development nations [1]. Repeated suicide attempts have strong correlations with previous attempt, a victim of sexual abuse, poor global functioning, having a psychiatric disorder, being on psychiatric treatment, depressions, anxiety and alcohol abuse or dependence [2]. Previous attempt has the greatest impact on suicide [3]. It has been reported that 61% of those that attempt suicide have had emergency medical care, and between 37.9% and 98.8% have been hospitalized [4,5]. In most suicide attempts, the stay in the emergency room is relatively short because family wants to leave once their immediate clinical problems have been resolved, and in-depth consultations is not enough during this period. A consultation during hospitalization is more benefit for patients and families to receive continuous psychotherapy [6].

In the current issue of Osong Public Health and Research Perspectives, Kim and Lee aimed to analyze the characteristics and factors affecting the survival of inpatients admitted following a suicide attempt [7]. The authors grouped a total of 3,095 cases retrieved from the Korean National Hospital Discharge In-depth Injury Survey database (from 2011 to 2015) according to survival and death, and analyzed using descriptive statistics, Chi-square, and logistic regression analysis. The authors found that the following factors had statistically significant risks on reducing survival: female, the middle-aged (more than 40 years old), poisoning, hanging, jumping, conflicts with family, physical diseases, mental health problems, and financial problems.

The authors suggested that the survival group that had a history of attempted suicide (the high-risk suicide group) should be further characterized with identification of the suicide methods and influencing risk factors for suicide prevention management policies. The authors highlighted the necessity to continuously expand the management policy according to these characteristics.

Conflicts of Interest

The author declared no conflicts of interest.

References

- [1] Organisation for Economic Co-operation and Development [Internet]. Suicide Rates: total, per 100,000 persons, 2015 or latest available. [cited 2019 Apr 12]. Available from: https://data.oecd.org/chart/58p1.
- [2] Beghi M, Rosenbaum JF, Cerri C, et al. Risk factors for fatal and nonfatal repetition of suicide attempts: a literature review. Neuropsychiatr Dis Treat 2013;9:1725-36.
- [3] Jung WY, Park JM, Kang CJ, et al. Clinical characteristics of completed versus non-completed suicide and re-attempt rates in 2-4 years. J Korean Neuropsychiatr Assoc 2009;48:488-95.
- [4] Bilen K, Ottosson C, Castren M, et al. Deliberate self-harm patients in the emergency department: factors associated with repeated self-harm among 1524 patients. Emerg Med | 2011;28(12):1019-25.
- [5] Lee OS, Cheon YJ, Kim JT, et al. Evaluation of Drugs for Suicide Attempt and Antidote Uses in Emergency Room of a Hospital in Korea. Korean J Clin Pharm 2012;22(4):304-15.
- [6] Kim HY, Kim BR, Kang SG, et al. Attempted Suicides in South Korea: A Multi-Center Analysis of Causes, Methods, and Psychiatric Diagnoses of Suicidal Attempters in 2013. Korean J Biol Psychiatry 2015;22(4):187-94.
- [7] Kim SM, Lee HS. Characteristics of Inpatients Who Survive Suicide Attempts. Osong Public Health Res Perspect 2019;10(1):32-8.